Express Mail No.: EV449555939US

#### **APPLICATION DATA SHEET**

Secrecy Order in Parent Appl.?::

<b>Application Information</b>	Appli	cation	Inform	atior
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Application number:: Filing Date:: Application Type:: Regular Subject Matter:: Utility Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R?:: None Number of CD disks:: Number of copies of CDs:: Sequence submission?:: Computer Readable Form (CRF)?:: No Number of copies of CRF:: Title :: **CRF RECEPTOR ANTAGONISTS AND** METHODS RELATING THERETO Attorney Docket Number:: 690068.459C4 Request for Early Publication?:: No Request for Non-Publication?:: No Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: No Petition included?:: No Petition Type:: Licensed U.S. Gov't Agency:: Contract or Grant No::

No

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Express Mail No.: EV449555939US

#### **First Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Mustapha

Middle Name::

Family Name::

Haddach

Name Suffix::

City of Residence::

San Diego

State or Province of Residence::

CA

Country of Residence::

US

Street of mailing address::

3545 Arnold Avenue

City of mailing address::

San Diego

State or Province of mailing address::

CA

Country of mailing address::

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## **Second Applicant Information**

Applicant Authority Type::

Inventor

Primary Citizenship Country::

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Status::

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CA

Country of Residence::

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Street of mailing address::

4528 Calle Mar de Armonia

2 Initial 02/23/04

Express Mail No.: EV449555939US

City of mailing address:: San Diego

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 92130

#### **Third Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: James

Middle Name::

Family Name:: McCarthy

Name Suffix::

City of Residence:: Zionsville

State or Province of Residence:: IN

Country of Residence:: US

Street of mailing address:: 4037 Oakleaf Drive

City of mailing address:: Zionsville

State or Province of mailing address:: IN

Country of mailing address:: US

Postal or Zip Code of mailing address:: 46077

## **Correspondence Information**

Correspondence Customer Number :: 00500

## Representative Information

Representative Customer Number::		00500
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# **Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/027,789	12/20/01
10/027,789	Continuation of	09/439,841	11/12/99
09/439,841	Continuation-in-part of	09/400,744	09/21/99
09/400,744	Continuation-in-part of	09/190,958	11/12/98

## Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

# **Assignee Information**

Assignee name::	Neurocrine Biosciences, Inc.
Street of mailing address::	10555 Science Center Drive
City of mailing address::	San Diego
State or Province of mailing address::	CA
Country of mailing address::	us
Postal or Zip Code of mailing address::	92121-1102

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